



**Terry Tamminen**  
Secretary for  
Environmental  
Protection

# California Regional Water Quality Control Board

## Central Coast Region



**Arnold Schwarzenegger**  
Governor

Internet Address: <http://www.swrcb.ca.gov/rwqcb3>  
895 Aerovista Place, Suite 101, San Luis Obispo, California 93401  
Phone (805) 549-3147 • FAX (805) 543-0397

### SECTION 401 WATER QUALITY CERTIFICATION APPLICATION FORM

Applications for Water Quality Certification shall be filed in accordance with Sections 3830 through 3869 of Title 23 of the California Code of Regulations. Provide detailed information for all categories that apply to the project and include the conditions under which work will be conducted. **All applicants must fill out Sections 1-4, 9, 10 and 15 or the application will be deemed incomplete.** Attach additional sheets as necessary. Responses by references should indicate the specific document and page number (include copies). **Indicate by "NA" all sections that do not apply, along with an explanation of why the project is exempt from the section.**

#### 1. APPLICANT/AGENT INFORMATION

|                 |                                |
|-----------------|--------------------------------|
| a) Applicant:   | b) Applicant's Representative: |
|                 |                                |
| Address:        | Address:                       |
|                 |                                |
|                 |                                |
| Phone No.       | Phone No.                      |
| Fax No.         | Fax No.                        |
| E mail address: | E mail address:                |

#### 2. PROJECT DESCRIPTION\*

|  |
|--|
| a) Project Title:  |
|  |
| b) Purpose/Goal:   |
|  |
| c) Project Activities:   |
|  |
|  |
| d) Proposed Schedule (start-up, duration, and completion dates): |
|  |

\* If, during the course of the project, the project description should change, the Regional Water Quality Control Board shall receive a written update as soon as changes are known.

**California Environmental Protection Agency**



Recycled Paper

### 3. PROJECT SITE DESCRIPTION

a) Project Location (Attach a road map of the site with waters clearly indicated and a 7.5 minute topographic map with the site outlined):

City or Area\_\_\_\_\_

County\_\_\_\_\_

Longitude/Latitude(if available)\_\_\_\_\_

Township/Range\_\_\_\_\_

b) Area Type/Description (check as appropriate):

Urban\_\_\_\_\_

Residential\_\_\_\_\_

Recreation\_\_\_\_\_

Agriculture\_\_\_\_\_

Open Space\_\_\_\_\_

Wildlife Corridor\_\_\_\_\_

Migratory Pathway\_\_\_\_\_

Spawning Habitat\_\_\_\_\_

Threatened/Endangered Species Habitat\_\_\_\_\_

Other\_\_\_\_\_

#### 4. IMPACTED WATER BODIES

a) Name(s) of Receiving Water Body(ies)\*:

b) Indicate in ACRES and LINEAR FEET (where appropriate) the proposed waters to be impacted and identify the impacts(s) as permanent and/or temporary for each water body type listed below:

|                    |                  |                             |
|--------------------|------------------|-----------------------------|
| Streambed:         | _____ permanent, | _____ temporary ACRES       |
|                    | _____ permanent, | _____ temporary LINEAR FEET |
| Riparian:          | _____ permanent, | _____ temporary ACRES       |
|                    | _____ permanent, | _____ temporary LINEAR FEET |
| Lake/Reservoir:    | _____ permanent, | _____ temporary ACRES       |
|                    | _____ permanent, | _____ temporary LINEAR FEET |
| Ocean/Estuary/Bay: | _____ permanent, | _____ temporary ACRES       |
|                    | _____ permanent, | _____ temporary LINEAR FEET |

Acres of wetlands determined by the Army Corp of Engineers to be jurisdictional.

|                         |                  |                             |
|-------------------------|------------------|-----------------------------|
| Jurisdictional Wetland: | _____ permanent, | _____ temporary ACRES       |
|                         | _____ permanent, | _____ temporary LINEAR FEET |

In addition to wetlands described above, include acres of additional wetlands beyond those determined by the Army Corp of Engineers to be jurisdictional. \*\*

|          |                  |                             |
|----------|------------------|-----------------------------|
| Wetland: | _____ permanent, | _____ temporary ACRES       |
|          | _____ permanent, | _____ temporary LINEAR FEET |

c) Indicate in CUBIC YARDS the volume of dredged material:

Indicate in CUBIC YARDS the volume of fill material:

Total area of disturbance within the waterbody: \_\_\_\_\_ acres \_\_\_\_\_ linear feet (if appropriate)

d) Indicate type(s) of material proposed to be dredged\*\*\*:

\*All receiving water bodies are identified in the *Water Quality Control Plan, Central Coast Basin Region* (Basin Plan). Any unnamed/unidentified waters must be extended to an identifiable tributary.

\*\* Whether “navigable” or not, The State and Regional Water Boards have jurisdiction over **all** waters of the state. This includes all wetlands, even those that do not fall under the jurisdiction of the Army Corp of Engineers. Whether navigable or not, an area is determined to be a wetland if it is delineated as such in accordance with the physical criteria (soils, vegetation, hydrology/ line of ordinary high-water) included in current Army Corp of Engineers regulatory protocols.

\*\*\* In addition to soil types, applicants must determine if dredged soils are contaminated. Please attach chemical analyses if appropriate.

## 5. WATER QUALITY SAMPLING

a) What is the potential for pollutant releases resulting from the entire proposed project? (e.g. increased peak or stormwater run-off; increased run-off of urban pollutants such as nutrients, pesticides, petrochemicals; refer to CEQA guidelines, appendix G for other potential pollutant releases )

b) Has water quality sampling occurred? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, what parameters were sampled? Please provide the data

c) Is water quality sampling planned? Yes \_\_\_\_\_ No \_\_\_\_\_  
If no, why not?

If yes, what parameters will be sampled?

## 6. DEWATERING OPERATIONS – Describe the method used to remove ground water and divert surface water if necessary to implement the proposed project. Please attach a diagram with description.

a) Discharge to Surface Water- Include name of receiving water, estimated volume and flow rates and management measure proposed:

b) Discharge to Retention Ponds- Include Location (on-site or off-site) and Control Measures:

c) Diversion of State Waters- Include Location (on-site or off-site) and Control Measures:

**7. WASTE DISCHARGE –Projects that include waste treatment systems (e.g. septic/leachfields) should fill out this section. Discharge from any system associated with the project should be described.**

a) Describe nature and composition of waste. Include projected volume (GPD) and source such as industrial, household, agriculture or other :

b) Location of Treatment and Disposal System\*:

c) Proposed Method of Treatment:

\* Attach map if necessary

**8. FEDERAL LICENSES/PERMITS**

a) Federal Agency(ies):

U.S. Army Corps of Engineer Yes \_\_\_ Other Agency? \_\_\_\_\_

File No.(s) (if known) \_\_\_\_\_

b) Permit Type(s) (please provide permit number(s) if known):

Nationwide Permit No.(s) \_\_\_\_\_ Regional General Permit No.(s) \_\_\_\_\_

Individual Permit \_\_\_\_\_ Other \_\_\_\_\_

c) Does the project require any Federal Application(s), Notification(s) or Correspondence?

Yes \_\_\_\_\_ (attach copy(ies)) No \_\_\_\_\_ (attach detailed explanation)

d) Does the project require a Federal Energy Regulatory Commission (FERC) license or amendment to a FERC license?

Yes \_\_\_\_\_ No \_\_\_\_\_ (attach application copy)

## 9. OTHER LICENSES/PERMITS/AGREEMENTS

e) Please list all other local or state required regulatory approvals (e.g. Department of Fish and Game Streambed alternation agreement, County Grading permit etc.) Submit final or draft copy if available.

| Agency | License/Permit/Agreement | Approval Date |
|--------|--------------------------|---------------|
|        |                          |               |
|        |                          |               |
|        |                          |               |
|        |                          |               |
|        |                          |               |

## 10. CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA) – The Regional Board is required to comply with CEQA before approving a project. 401 Certification will not be granted without CEQA compliance.

Indicate CEQA Document (submit final or draft copy).

Categorical Exemption\_\_\_\_\_ Negative Declaration\_\_\_\_\_ Environmental Impact Report\_\_\_\_\_

State Clearinghouse file no. \_\_\_\_\_

Has the document been certified/approved, or has a Notice of Exemption been filed?\_\_\_\_\_

If yes, date of approval/filing\_\_\_\_\_ If no, expected approval/filing date:\_\_\_\_\_

Lead Agency\_\_\_\_\_

## 11. CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA) MITIGATION

Describe all mitigation measures required for CEQA relating to the following;

Biological Resources \_\_\_\_\_

\_\_\_\_\_

Septic Systems \_\_\_\_\_

\_\_\_\_\_

Soil erosion/grading \_\_\_\_\_

\_\_\_\_\_

Water supply/Groundwater \_\_\_\_\_

\_\_\_\_\_

Water Quality / Hydrology \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Riparian \_\_\_\_\_

\_\_\_\_\_

Wetlands \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Wildlife \_\_\_\_\_

\_\_\_\_\_

## 12. COMPENSATORY MITIGATION

Indicate in ACRES and LINEAR FEET (where appropriate) the total quantity of waters proposed to be Created, Restored and/or Enhanced for purposes of providing Compensatory Mitigation:

| Water Body Type         | Preserved | Created | Restored | Enhanced |
|-------------------------|-----------|---------|----------|----------|
| Jurisdictional Wetland  |           |         |          |          |
| All additional Wetlands |           |         |          |          |
| Streambed               |           |         |          |          |
| Riparian                |           |         |          |          |
| Lake/Reservoir          |           |         |          |          |
| Ocean/Estuary/Bay       |           |         |          |          |

- a) If contributing to a Mitigation or Conservation Bank, indicate the administrator, dollar amount, acreage, and water body type (omit if not applicable):

Bank Administrator \_\_\_\_\_

\$ \_\_\_\_\_ for \_\_\_\_\_ acres of \_\_\_\_\_ (water body type)

- b) Other Mitigation (omit if not applicable):

- c) Location of Compensatory Mitigation Site(s) (attach map of suitable quality and detail):

City or Area \_\_\_\_\_

County \_\_\_\_\_

Longitude/Latitude \_\_\_\_\_

Township/Range \_\_\_\_\_

## 13. OTHER ACTIONS/BEST MANAGEMENT PRACTICES (BMPs)

Briefly describe or reference other actions/BMPs to be implemented to avoid and/or minimize impacts to waters, including preservation of habitats, erosion control measures, project scheduling, flow diversions, etc.

**14. PAST/FUTURE PROPOSALS BY THE APPLICANT**

Briefly list/describe any projects carried out in the last 5 years or planned for implementation in the next 5 years that are in any way related to the proposed activity or may impact the same receiving body of water. Include estimated adverse impacts.

**15. SIGNATURE**

I hereby certify under penalty of perjury that the information provided in this application and in any attachments are true and accurate to the best of my knowledge.

\_\_\_\_\_  
Applicant's Signature (or Agent)

\_\_\_\_\_  
Date

**Please forward the completed application to:**

**California Regional Water Quality Control Board, Central Coast Region  
895 Aerovista Place., Suite 101  
San Luis Obispo, CA 93401  
Attn. 401 coordinator**

**Should you have any questions regarding the water quality certification process, please contact our office at (805) 549-3147**